CPD-IDIS Reference Manual Content Revised for IDIS Version 7.0 (12/13/2002)

		HOME Pr	ogram –	- Ren	tal Co	mpletio	on F	Report			
					М	Mark Appropriate Box					
						Original Submission Revision					
Part A: Activity	Informatio	n									
Activity Number:	2. Name of Participant:				Participant Tax ID Number: 4. CF			4. CHD	HDO Tax ID Number		
6. Type of Property (check of	one):	1		7. Does	s Activity Have	e Rent Except	tion?	8. Mixed Inc	come Activi	ity?	9. Mixed Use Activity?
(1) Condominium		(2) Cooperative		(1)			(1)		S		(1)
(3) Single Room Occupancy		(4) None of the Above		(2)	(2) No		(2) No		•		(2) No
Part B: Financia	l Structure	of Activity									
Type of Activity Financed (che	eck one):										
(3) Rehabilitation Only (3) Acquisition Only (5) Acquisition & New Co								onstructi	on		
(4) New Constru	ction Only	(4)	Acquisition 8	k Rehab	ilitation						
Activity Costs											
1. HOME Funds (Complete	(1) Direct l	Annual Intere	Annual Interest Rate			Amortization Period YRS			\$		
appropriate items (1) –(5))	(2) Grant		•							\$	
	(3) Deferre	ed Payment Loan	Annual Interest Rate			% Amortization Period YRS			YRS	\$	
	(4) Community Housing Development Organization (CHDO)) Loan				l	
	a. TA	Loan	ın				\$				
	b. Se	ed Loan				\$					
	Total CHDO Loan (Total items 4a & 4b)									\$	
	Total HOMI	Total HOME Funds (Total items (1) – (5))							\$		
2. Public Funds	(1) Other Federal Funds					\$					
	(2) State/Local Appropriated Funds					\$					
	(3) Stale/Local Tax Exempt Bond Proceeds					\$					
	Total Public Funds (Total items (1) – (3))					l				\$	
3. Private Funds	(1) Private	Loan Funds	Annual Interes	st Rate %	Amortizatio	n Period Yrs	\$				
	(2) Owner Cash Contribution					\$					
	(3) Net Syndication Proceeds (No low income tax credit)										
	(4 Private Grants					\$				\$	
	Total Private Funds (Total items (1) – (3))							\$			
4. Low Income Tax Credit Syndication Proceeds									\$		
5 HOME B											
5 HOME Program Incom	ne									\$	

Part C Household Characteristics. Complete one line for each unit assisted with HOME funds. Enter one code only in each block. If the activity is a 1-4 unit owner-occupied rental activity, also provide tenant characteristics. For activities which include multiple addresses, complete a separate Household Characteristic (Part C) for each address.

Activity Address:	Activity Number:

Unit #	# of Bedrooms	Occupancy	Tenant Contribution	Subsidy Amount	Total Rent	% of Area Median	Hispanic	Race of Head of Household	Size of Household	Head of Household	Rental Assistance

No. of Bedrooms Code % of Area Median Code

1 = 1 Bedroom 1 = 0-30% 2 = 2 Bedrooms 2 = 30 - 50% 3 = 3 Bedrooms 3 = 50 - 60% 4 = 4 Bedrooms 4 = 60 - 80%

Occupancy Code
1 = Tenant
2 = Owner

Hispanic
Y = Yes
N = No

3 = Vacant

Race of Head of Household Code

11 = White

12 = Black/African American

13 = Asian

14 = American Indian/Alaskan Native

15 = Native Hawaiian/Other Pacific Islander

16 = American Indian/Alaska Native & White

17 = Asian & White

18 = Black/African American & White

19 = American Indian/Alaska Native & Black/African American

20 = Other Multi Racial

Head of Household Code

1 = Single/Non-Elderly

2 = Elderly

3 = Related/Single Parent

4 = Related/Parent

5 = Other

Rental Assistance Code

1 = Section 8

2 = HOME TBRA

3 = Other

4 - No Assistance